

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MX	X551	10/20
O.I.P.E. CLASSIFIER	TH		11/4
FORMALITY REVIEW	6.	JE 873	12-05-00
RESPONSE FORMALITY REVIEW	M.H	615	07-11-01

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	11/18/01
2	✓	✓	11/18/01
3	✓	✓	11/18/01
4	✓	✓	11/18/01
5	✓	✓	11/18/01
6	✓	✓	11/18/01
7	✓	✓	11/18/01
8	✓	✓	11/18/01
9	✓	✓	11/18/01
10	✓	✓	11/18/01
11	✓	✓	11/18/01
12	✓	✓	11/18/01
13	✓	✓	11/18/01
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If more than 150 claims or 10 actions  
 staple additional sheet here

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